## IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

| OF<br>TH | RE THE GENERAL ADJUDICATION  RIGHTS TO THE USE OF WATER FROM  E COEUR D'ALENE-SPOKANE RIVER  SIN WATER SYSTEM  CIVIL CASE NUMBER: 49576  ID Number: 94-935  Date Received: 9-30-3014  Receipt No: NO30849  |
|----------|--|
|          | Amount: <u>57.00</u> By: <u> </u>  |
|          | NOTICE OF CLAIM TO A WATER RIGHT RECEIVED  |
|          | For domestic and/or stockwater purposes where daily use is less than 13,000 gallons per day $SEP \ 3 \ 0 \ 20\%$   |
| Plea     | ase type or print clearly  |
|          | Name of claimant(s) Fred Scheffelmaier Phone 208-689-39  |
| ••       | Mailing address 18500 S. Oh Lane Rd Catallo Id ZIP 83810   |
| 2.       | Date of priority (only one (1) per claim)  |
| 3.       | Source of water supply (check one) Ground Water ( ) or Other (X) (a) Spring  |
|          | which is tributary to (b) S Black Cr   |
| 4.       | Location of point of diversion is: Township $47N$ , Range $2\omega$ , Section $20$ ,   |
|          | SW 1/4 of NW1/4, or Govt. Lot, B.M., County of Kootenai  |
|          | Parcel (PIN) no. 47N 02W-20-3800   |
|          | Additional points of diversion, if any:  |
|          | If available, GPS coordinates  |
| 5.       | Description of diverting works (wells, pumps, spring boxes, pipelines, etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well.  Spring box, Pond - Dimensions of Pond |
| 6.       | Water is claimed for the following: (Limited to domestic and/or stockwater uses. See page 1 of the instructions.)  |
| _        | For Stockwater Storage purposes from 1-1 to 12-31 amount 0.90  |
| 7.       | Total quantity claimed 6.90 cfs ( ) or AFY 💉   |
| 8.       | Non-irrigation uses; describe fully (e.g. Domestic: give number of households served if single ownership; Stockwater: type and number of livestock, etc.): $\frac{40 \text{ head cattle}}{100000000000000000000000000000000000$  |

| 9.  | Location of place of use is: Township $47N$ , Range $800$ , Section $200$ , $800$ , 1/4 of $100$ 1/4, or Govt. Lot, B.M., Parcel (PIN) no. (if different than shown in Item 4)  |
|-----|---|
|     | For (check one) Domestic ( ) Stock ( ) Domestic and Stock ( )  Additional places of use, if any:  |
| 10. | In which county(ies) are lands listed above as place of use located? <u>Kootenal</u>  |
| 11. | Do you own the property listed above as place of use? Yes (X) No ( ) If your answer is no, describe in remarks below the authority you have to claim this water right.  |
| 12. | Describe any other water rights used at the same place and for the same purposes as described above.  |
|     | or None (X)   |
| 13. | Remarks:  |
|     |   |
| 14. | Basis of claim (check one) Beneficial Use ( ) Posted Notice ( ) License ( ) Permit ( ) Decree ( )   |
|     | Court Decree Date Plaintiff v. Defendant  |
|     | If applicable, provide IDWR water right number  |
| 15. | Signature(s)  a. By signing below, I/we acknowledge that I/we have received, read and understand the form entitled "How you will receive notices in the Coeur d'Alene-Spokane River Basin Adjudication".  b. I/We do (**) do not ( ) wish to receive and pay a small annual fee for monthly copies of the docket sheet. |
|     | Number of attachments.  |
|     | For individuals:  I/We do solemnly swear or affirm under penalty of perjury that the statements contained in the foregoing document are true and correct.   |
|     | Signature of claimant(s) Free Selection Date: 9-30-14   |
|     | document are true and correct.  Signature of claimant(s)  Treef 5 Selection Market Date: 9-30-14  Date:   |
|     | For organizations:<br>I do solemnly swear or affirm under penalty of perjury that I am  |
|     | of of   |
|     | that I have signed the foregoing document in the space below as   |
|     | of of   |
|     | and that the statements contained in the forgoing document are true and correct.  |
|     | Signature of authorized agent Date  |
|     | Title and organization  |
| 16. | Notice of appearance:  Notice is hereby given that I,, will be acting as attorney at law of behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.                                   |
|     | Signature Date  |
|     | Address   |
|     |   |